								_A	pplicatio	n or I	Docket Nu	mber	
	PATENT												
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMAL TYPE	SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
L	OTAL CLAIMS	3	27	27		·		Ε	FEE	7	RATE	FEE	
F	OR		NUMBEF	NUMBER FILED		NUMBER EXTRA		FEE	385.00	OR		1	
T	OTAL CHARGE	ABLE CLAIMS	27 mi	27 minus 20=		* 7		X\$ 9=		OR	1		
INI	DEPENDENT C	CLAIMS	9 m	q minus 3 =			X43	=	63	1	Y00	 	
М	JLTIPLE DEPE	NDENT CLAIM F	RESENT				+145=		258	OR			
* 11	the difference	e in column 1 is	less than z	ess than zero, enter "0" in column 2			TOTA		706	OR OR			
CLAIMS AS AMENDED - PART II							ť	•	700	1 °',	OTHER	THAN	
_	(Column 1) (Colum					(Column 3)	SMAI	SMALL ENTITY			SMALL		
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA	RATI	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	*.	Minus	**		=	X\$ 9	=		OR	X\$18=		
AME	Independent	*	Minus	***		=	X43=		***	OR	X86=		
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						. 445	7		1 1			
1,8,13,16,22,24,25,26,27,							+145			OR	+290=		
								ADDIT. FEE OR ADDIT. FEE					
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST						·						
NDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIOU PAID F	BER USLY	PRESENT EXTRA	RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9=			OR	X\$18=		
AME	Independent	*	Minus	***		=	X43=	1			X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							╁		OR			
										OR	+290=		
		ADDIT. FE			OR A	TOTAL ADDIT. FEE							
		(Column 1) CLAIMS		(Columi		(Column 3)				_			
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	ER JSLY	PRESENT EXTRA	RATE	T	ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	*	Minus	** ,		=	X\$ 9=			OR	X\$18=		
AME			Minus	***		=	X43=	+			X86=		
	FIRST PRESEN	NTATION OF MU	LTIPLE DEPI	ENDENT C	MIALC			╁		OR			
* If 1	the entry in colum	nn 1 is less than the	entry in colum	nn 2 write "C)" in colu	imn 3	+145=			OR L	+290=		
***![* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
Tł	ne "Highest Numb	per Previously Paid	For" (Total or I	ndependent	l) is the h	nighest number	found in the a	pprop	oriate box i	in colur	nn 1.		